PTO/SB/17 (12-04v2)

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Complete if Known

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Effective on 12/08/2004. uant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Applicant claims small entity status. See 37 CFR 1 27	Feed and suant to the Consolid	atea Appropri	ations Act, 2005 (H.R.	4878). •	Application Nun	nber	10/6	669,925
Applicant claims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT (\$) 510.00   Art Unit 1644	FEE TRANSMITTAL				Filing Date		09/2	24/2003
And I would care small entity status. See 3 FOR 1.27   And Unit   1644   Attorney Docket No.   66802.055	For FY 2005			First Named Inv	entor/	Hildeb	rand, et al.	
TOTAL AMOUNT OF PAYMENT (S)   \$510.00   Attorney Docket No.   \$6802.055	Applicant daims small antity status. See 27 CED 4 27				Examiner Name	3	M.	Dibrino
Check   Credit Card   Money Order   None   Other (please identify):	Applicant claims small entity status. See 37 CFR 1.27			Art Unit		,	1644	
Check	TOTAL AMOUNT OF PAY	MENT (\$	<u>510.0</u> 0	0	Attorney Docke	t No.	668	02.055
Deposit Account Deposit Account Number:  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge fee(s) indicated below indicated below indicated below, except for the filling fee  Charge any additional fee(s) or underpayments of fee(s)	METHOD OF PAYMEN	「(check a	ll that apply)_			. •		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	Check Credit (	Card	Money Order	Noi	ne Other (p	olease identify	):	
Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  SEARCH FEES  SEARCH FEES  Small Entity  Fee (s) Fee Fe Fee Fee (s) Fee Fee Fee (s) Fee Fee Fee (s) Fee Fee Fee (s) Fee Fee Fee Fee (s) Fee Fee Fee Fee Fee Fee (s) Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	Deposit Account D	eposit Accou	nt Number:		Deposit A	ccount Name:_		· · · · · · · · · · · · · · · · · · ·
Charge any additional fee(s) or underpayments of fee(s)  Under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information abould not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity Application Type Fee (\$) Fee	•							
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Telephone   Tele	WARNING: Information on this	form may b	ecome public. Credit	t card in	formation should n	ot be included	on this form. Pro	ovide credit card
BASIC FILING, SEARCH, AND EXAMINATION FEES   Small Entity   Fee (\$)   Small Entity   Fee (\$)		on PTO-203	В.				<del></del> .	
Filing FEES   Small Entity   Fee (\$)   Fee (		CH AND	EVARAINATION	EEEC				
Application Type   Fee (\$)   Fee (	1. BASIC FILING, SEAR				RCH FEES	EXAMINA	TION FEES	
Utility   300   150   500   250   200   100	Application Type			Fee (S				Fees Paid (\$)
Design								
Plant   200   100   300   150   160   80	•	200	100	100			65	
Reissue   300   150   500   250   600   300	•	200	100	300		160		
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Reissue	300	150	500		600		
Fee Description   Fee (\$)   Fee (\$)   Fee (\$)	Provisional	200	100	0		0		
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  - 3 or HP = 0 x = 0  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  -100 = 0 /50 = (round up to a whole number) x = 0  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 3 month extension of time  Telephone 405-607-8600	2. EXCESS CLAIM FEE	S						
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Fee (\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fees Paid (\$)  Fees Paid (\$)  Other (e.g., late filing surcharge):  3 month extension of time  Registration No.  (Attorney/Agent)  Telephone  405-607-8600		naludina I	Paiaguag)					
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) = Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = 0 / 50 = (round up to a whole number) x = 0  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 3 month extension of time  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)								
Total Claims    Extra Claims   Fee (\$)   Fee Paid (\$)   Fee (\$)   Fee (\$)   Fee (\$)   Fee (\$)		,				· ·		
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  -3 or HP = 0 x = 0  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets Number of each additional 50 or fraction thereof -100 = 0 /50 = (round up to a whole number) x = 0  4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 3 month extension of time  Registration No. (Attorney/Agent)  Telephone 405-607-8600	• •		ms Fee (\$)	Fe	e Paid (\$)		Multiple De	pendent Claims
Indep. Claims  - 3 or HP = 0 x = 0  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = 0 / 50 = (round up to a whole number) x = 0  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 3 month extension of time  Registration No.  (Attorney/Agent)  Telephone 405-607-8600				_=	0		<u>Fee (\$)</u>	Fee Paid (\$)
-3 or HP = 0 x = 0  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets				Fed	e Paid (\$)			
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof each each each each each each each each	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
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Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 3 month extension of time  SUBMITTED BY  Signature Registration No. (Attorney/Agent) Telephone 405-607-8600					(round <b>up</b> to a	whole numbe	r) x	=0
Other (e.g., late filing surcharge):  3 month extension of time  510.00  SUBMITTED BY  Signature  Registration No. (Attorney/Agent)  Telephone 405-607-8600	4. OTHER FEE(S)  Non-English Specification. \$130 fee (no small entity discount)							
Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Telephone 405-607-8600	2 month outpraign of time							
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(Attorney/Agent)	1 MA.	MIZ					Telephon	e 405-607-8600
AMBERTATION I I KATATOO I HACTAT PATI I DAK HACAMAAT ZIIIN	Name (Print/Type)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	hryn I L	ete		-		ecember 1, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/21 (09-04)

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United Fa	perwork Reduction Act of 1995	no persons are required to respond to a coll	ection of info	ormation unless it displays a valid OMB control number	
- 1561		Application Number		10/669,925	
TRANSMITTAL		Filing Date		09/24/2003	
	FORM	First Named Inventor		Hildebrand, et al.	
		Art Unit		1644	
(to be used for	all correspondence after initial	Examiner Name filing)		M. Dibrino	
Total Number of	Pages in This Submission	Attorney Docket Number	66802.055		
		ENCLOSURES (Check all t	that apply)	)	
Fee Trans	smittal Form	Drawing(s)		After Allowance Communication to TO	
F	ee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Extension  Express A  Information  Certified of Document  Reply to I Incomple	ent/Reply  fiter Final  ffidavits/declaration(s)  n of Time Request  Abandonment Request  on Disclosure Statement  Copy of Priority  tt(s)  Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence And Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks 1. Transmittal Form Letter (1 page) 2. Fee Transmittal Form (1 page) 3. Response/Amendment (26 pages) 4. Petition for Extension of Time (1 p 5. Credit Card Form 2038 (1 page)	ddress	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):	
		Patent Application Fee Determinat     Pre-addressed post card (1 card)	tion Record	d (1page)	
	SIGNA	TURE OF APPLICANT, ATTOR	RNEY, O	R AGENT	
Firm Name	DUNLA	AP, CODDING & ROGERS	S, P.C.		
Signature	dellaud	$\overline{}$			
Printed name	ТО К	athryn L. Hester, Ph.I	D.		
Date	December	1. 2006	leg. No.	46,768	

## CERTIFICATE OF TRANSIVISSION/IVIAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: "SENT BY EXPRESS MAIL EV 616015790US, December 1, 2006 \*\*\*

Signature

Signature

Typed or printed name

Kathryn L. Hester, Ph.D.

Date Dece

December 1, 2006

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